

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000307814

Entity Name: NEW WAY RECOVERY RESIDENCY LLC

Current Principal Place of Business:

2747 LINWOOD AVE
NAPLES, FL 34112

Current Mailing Address:

PO BOX 8281
NAPLES, FL 34112 UN

FEI Number: 85-3721875

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VANHOUTEN, LYNZI
2747 LINWOOD AVE
NAPLES, FL 34112 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name VANHOUTEN, LYNZI
Address 2747 LINWOOD AVE
City-State-Zip: NAPLES FL 34112

Title AMBR
Name VANHOUTEN, SAMUEL
Address 2747 LINWOOD AVE
City-State-Zip: NAPLES FL 34112

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LYNZI VANHOUTEN

MANAGER

04/29/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date